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I hereby appoint:					
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OR					
Practitioner(s) nemed below (if more than ten patent practitioners are to be named, then a customer number must be used):					
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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).					
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Assignee Name and Address:					
Q-CORE MEDICAL LTD					
14 Hamefalsim Street, P.O. Box 3341					
Petach Tikva 49130, Israel					
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be					
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SIGNATURE of Assignee of Record					
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee					
Signature	Core Medical Ltd.			Data 07/00	109
Name	NOC51-423712-2 E:	an		Telephone 9727	3 23888
Title	Mr Mor.	kelm			

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (end by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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